

SECURITY CLASSIFICATION		FINAL PROJECT EVALUATION FORM		
Approved For Release 2000/08/07 : CIA-RDP96-00788R001200360003-8				
1. CUSTOMER OFFICE	2. INFORMATION REQUESTED DATE			
	YEAR	MONTH	DAY	
3. TARGET COUNTRIES	4. PROJECT NUMBER		5. SOURCE NUMBER	
6. NUMBER REPORTS SUBMITTED FOR PROJECT	7. REPORT IDENTIFICATION NUMBERS			
8. REFERENCES		9. REASON FOR EVALUATION (select one)		
A. REQUIREMENTS (CITE) _____ (ICR/CIR/DIRM 3/DIRM 9) <input type="checkbox"/> B. INITIATIVE REPORT		<input type="checkbox"/> A. ICR RESPONSE <input type="checkbox"/> B. COLLECTORS REQUEST <input type="checkbox"/> C. SELECTED BY ANALYST		
10. VALUE OF INFORMATION (select one)		11. TYPES OF PRODUCTS TO BENEFIT FROM USE OF REPORTED INFORMATION		
<input type="checkbox"/> A. OF MAJOR SIGNIFICANCE <input type="checkbox"/> B. OF VALUE <input type="checkbox"/> C. OF NO VALUE		<input type="checkbox"/> A. BASIC INTELLIGENCE <input type="checkbox"/> B. CURRENT INTELLIGENCE <input type="checkbox"/> C. ESTIMATIVE INTELLIGENCE <input type="checkbox"/> D. S&T INTELLIGENCE		
12. REASON INFORMATION IS OF NO VALUE (select one only)		13. DEGREE OF REQUIREMENT SATISFACTION (select one only)		
<input type="checkbox"/> A. TOO FRAGMENTARY <input type="checkbox"/> B. DUPLICATIVE <input type="checkbox"/> C. UNTIMELY <input type="checkbox"/> D. NOT RESPONSIVE TO TASKING CITED		<input type="checkbox"/> A. COMPLETELY SATISFIED <input type="checkbox"/> B. PARTIALLY SATISFIED <input type="checkbox"/> C. NOT SATISFIED AT ALL		
14. NAME OF PRODUCT(S)				
15. COLLECTION GUIDANCE (Mandatory unless 13A, above, is checked)				
16. REMARKS (Optional)				
				SECURITY CLASSIFICATION

(remarks continued)

17. FOREIGN DISCLOSURE DATA

A. EVALUATORS RECOMMENDATION
(select one only)

- ☐ RELEASABLE EVALUATION NOT REQUESTED
☐ EVALUATION IS NOT RELEASABLE
☐ PARA(S) _____, ABOVE, IS/ARE
RELEASABLE TO THE GOVT(S) OF _____

B. FOREIGN DISCLOSURE AUTHORITY DECISION
(select one only)

- ☐ EVALUATION IS NOT RELEASABLE
☐ NON-CAVEATED PORTIONS OF THIS EVAL, AS
INDICATED, MAY BE REL TO THE AUTH REPS
OF THE GOVT(S) OF _____
AT THE DISCRETION OF THE ORIGINATOR.

18. EVALUATOR'S NAME

19. EVALUATOR'S OFFICE
SYMBOL20. SECURITY INSTRUCTIONS
(DOWNGRADING, DECLASSIFICATION,
AND SPECIAL MARKINGS)

21. DATE EVALUATED

22. ORIGINATOR OF REQUEST FOR INFORMATION

YEAR

MONTH

DAY

23. (Signature of evaluator) _____

SECURITY CLASSIFICATION